



Docket No.: WEN-0037
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Paolo Vinciguerra et al.

Application No.: 10/511,897

Confirmation No.: 6439

Filed: October 20, 2004

Art Unit: 3735

For: ABLATION METHOD USING A LASER
BEAM AND AN APPARATUS FOR THE
ABLATION

Examiner: Ahmed M. Farah

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

INTRODUCTORY COMMENTS

In response to the Office Action dated January 5, 2007, please amend the above-identified U.S. patent application as follows:

Amendments to the Title begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 4 of this paper.

IFW



AMENDMENT TRANSMITTAL LETTER				Docket No. WEN-0037	
Application No. 10/511,897-Conf. #6439		Filing Date October 20, 2004		Examiner A. M. Farah	
				Art Unit 3735	
Applicant(s): Paolo Vinciguerra et al.					
Invention: ABLATION METHOD USING A LASER BEAM AND AN APPARATUS FOR THE ABLATION					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	3	- 20 =	0	x 50.00	0.00
Independent Claims	1	- 3 =	0	x 200.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>18-0013</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
_____ Ronald P. Kanaren Attorney/Agent/Reg. No.: 24,104 RADER, FISHMAN & GRAUER PLLC 1233 20th Street, N.W. Suite 501 Washington, DC 20036 (202) 955-3750				Dated: <u>April 5, 2007</u>	

AMENDMENTS TO THE TITLE

Please amend the Title by rewriting the Title as set forth below in marked-up form.

~~--ABLATION METHOD FOR ANALYSIS OF AN ABLATED SURFACE, ANALYSIS~~
~~ON INCONSISTENCY IN A LASER BEAM, AND CALIBRATION OF LASER BEAM~~
~~IRRADIATION DATA USING A LASER BEAM AND AN APPARATUS FOR THE~~
~~ABLATION--~~